

## **NEW LEPC MEMBER APPLICATION**

New LEPC members are to submit this form to the State Emergency Response Commission, Nebraska Emergency Management Agency, 1300 Military Road, Lincoln, NE 68508-1090, 30 days prior to the next regularly scheduled meeting.

**Member Name** \_\_\_\_\_

**Home Address** \_\_\_\_\_

**Work Address** \_\_\_\_\_

**Occupation** \_\_\_\_\_

**Work Phone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **E Mail** \_\_\_\_\_

**Area new member shall represent** \_\_\_\_\_

**Date Term Expires** \_\_\_\_\_

I, \_\_\_\_\_ submit the above person for approval by the State Emergency Response Commission, to be a active member of the \_\_\_\_\_ Local Emergency Planning Committee.

Sincerely,

\_\_\_\_\_  
Chairperson, \_\_\_\_\_ LEPC